Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.					
	TITION FOR EXTENSION OF	·		Docket Number (Optional) 2183-6372US	
In re Application of van Weeghel et al.					
		Application Number	10/791,152	Filed March 2, 2004	
This is a request under the provisio		For DETERMINATION AND QUANTIFICATION OF RED BLOOD CELL POPULATIONS IN SAMPLES			
70	5	Group Art Unit 1645	Examiner		
DEE	This is a request under the provisio	ns of 37 CFR 1.136(a) to extend the per	iod for filing a	
	response in the above identified application. The requested extension and appropriate non-small-entity fee are as follows (check time period desired):				
	☐ One month (37 CFR	1.17(a)(1))		\$	
	☐ Two months (37 CFI	R 1.17(a)(2))		\$	
	☐ Three months (37 C	FR 1.17(a)(3))		\$	
				\$ <u>1530</u>	
	Five months (37 CFR 1.17(a)(5))			\$	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 765.00. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1469. I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
	November 19, 2004				
	Date			Signature	
			Allen C. Tu		
Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple					
forn	ns if more than one signature is required, see		erescor men represental	uve(a) are required. Submit multiple	
★Total of 1 forms are submitted. CERTIFICATE OF MAILING					
	CENTRICATE OF MAILURE				

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Express Mail Label Number: EL994827146US

Date of Deposit: November 19, 2004 Person Making Deposit: Steve Wong